



REQUEST FOR PROPOSALS

Solicitation #23-440-RFP 0004

Project Based Vouchers

**1815 EGBERT AVENUE
SAN FRANCISCO, CA 94124**

November 16, 2023



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ATTACHMENTS

- A Authority PBV Application
- B HUD Form 50071 (01/14), **Certification of Payments to Influence Federal Transactions**
- B-1 Standard Form LLL (Rev, 01/14), **Disclosure of Lobbying Activities**
- C HUD Form 2880

INTRODUCTION

The Housing Authority of the City and County of San Francisco (“Authority” or “SFHA”), a public entity, was established by the Board of Supervisors in 1938 to provide federally subsidized housing and housing assistance to low-income families within the City and County of San Francisco. The Authority is headed by a Chief Executive Officer (CEO) and is governed by a seven-person board of commissioners. The Authority is subject to the requirements of Title 24 of the Code of Federal regulations (hereinafter, “CFR”), as well as other applicable state and local laws and the Authority’s own policy documents. Though brought into existence by a Resolution of the City and County of San Francisco, the Authority is a separate entity.

INFORMATION AT A GLANCE

| | |
|---------------------------------------|---|
| AUTHORITY CONTACT PERSON: | Zawadi Lange E-mail: procurement@sfha.org Phone: 650-356-8487 TDD/TTY: (415) 467-6754 |
| WHERE TO OBTAIN THE RFP DOCUMENTS: | The RFP and Application can be found on the Authority’s website at www.sfha.org |
| PROPOSAL SCOPE: | ONLY proposals from the following San Francisco zip codes will be reviewed: 94129, 94123, 94127, 94131, 94114, 94116, 94118, 94117, 94107, 94122, 94112, 94121, and 94110. |
| QUESTION SUBMITTAL DEADLINE: | Questions will be accepted from the date of publishing this RFP until such time that this solicitation is closed. Questions may be submitted to procurement@sfha.org |
| ANSWERS TO QUESTIONS: | Answers to all questions received by Friday of any given week will be answered through an addendum which will be posted in the on the Authority website: www.sfha.org within five (5) business days until such time that this solicitation is closed out. |
| HOW TO SUBMIT A RESPONSE TO THIS RFP: | All applications and supporting documents must be submitted via email to: procurement@sfha.org with receipt requested. |
| PROPOSAL SUBMITTAL DEADLINE: | Applications and supporting documentation for project-based voucher units will be accepted and reviewed on a FIRST COME, FIRST SERVED basis until 5:00 pm (PST) Friday, December 15, 2023 , or until all available PBV assistance has been committed. |

1.0 RESERVATION OF RIGHTS

The Authority retains the following enumerated rights with regards to this Solicitation:

1.1 Reject, Waive, or Terminate the RFP. The Authority reserves the right to reject any or all proposals, waive any informality in the RFP process, or terminate the RFP process at any time, if deemed by the Authority to be in its best interest.

1.2 Not Award. The Authority is under no obligation to award a contract pursuant to this RFP.

1.3 Reject any Proposal. The Authority may reject and not consider any proposal that does not meet the requirements of this RFP, including but not limited to incomplete proposals and/or proposals offering alternate or non-requested services.

1.4 No Obligation to Compensate. The Authority is not obligated to compensate any proposer for any costs incurred in responding to this RFP.

1.5 Right to Reject Applications. The Authority reserves the right to reject applications at any time for misinformation, errors, or omissions of any kind, regardless of the stage in the process that has been achieved.

2.0 SOLICITATION INFORMATION

2.1 Request for PBV Owner Proposals. The Housing Authority of the City and County of San Francisco (Authority) invites property Owners to submit a written proposal demonstrating their project eligibility, qualifications, and interest in securing Project Based Vouchers (PBV) under the Housing Choice Voucher (HCV) Program that will serve families in need of housing in San Francisco. PBV assistance provides rental subsidies paid on behalf of eligible families who live in units that are contracted under the program. The Authority will offer Owners of selected quality affordable housing an allocation of vouchers that can be attached to designated units of their rental housing. Owners will gain the benefit of a multi-year contract with the Authority ensuring a Program approved rent for their properties for an extended period. Eligible families who are referred by the Authority will gain the benefit of quality affordable housing.

2.2 Number of PBV Assisted Units. In order to improve the utilization of voucher funding and increase the number of available affordable housing units in the City and County of San Francisco, the Authority is accepting proposals for up to two hundred

(200) of its PBVs for placement in existing housing units to provide affordable housing to low-income residents in San Francisco.

2.3 Scope of the Solicitation. This solicitation is open to existing units/buildings ONLY. A housing unit will be considered an *existing unit* for purposes of the PBV program if, at the time of notice of Authority selection, the units substantially comply with the inspection requirements under Housing Quality Standards (HQS) as mandated by the U.S. Department of Housing and Urban Development (HUD). Selected existing projects must execute a PBV HAP contract with the Authority before the Authority can provide rental assistance. The initial term can be for up to twenty (20) years.

2.4 Eligible Projects. The statutory goal of project basing units is to deconcentrate poverty and expand housing and economic opportunities for low-income families. To achieve this goal, the Authority is interested in expanding opportunities for voucher participants in the following San Francisco zip codes: **94129, 94123, 94127, 94131, 94114, 94116, 94118, 94117, 94107, 94122, 94112, 94121, and 94110.** Proposals outside of these zip code areas will be denied. Preference points will be given to properties that also provide supportive services.

2.5 Ineligible Projects. The following project types will not be considered for award pursuant to this Solicitation. Submission of applications for any of the project types listed below will be denied.

- Single Room Occupancy (SRO) units will NOT be awarded under this PBV solicitation.
- Cooperative housing units will NOT be awarded under this PBV solicitation.
- In accordance with 24 CFR 983.53, the Authority may not attach PBV assistance to:
 - Shared housing
 - Units on the grounds of a penal, reformatory, medical, mental, or similar public or private institution
 - Nursing homes or facilities providing continuous psychiatric, medical, nursing service, board, and care, or intermediate care (assistance may be approved for a dwelling unit in an assisted living facility that provides home health care service such as nursing and therapy for residents of the housing)
 - Units owned or controlled by an educational institution or its affiliate and designed for occupancy by the students of the institution
 - Manufactured homes

- Transitional housing
 - Owner-occupied units
 - Units occupied by a family ineligible for participation in the PBV Program
- The Authority may not attach PBV assistance to subsidized housing types determined ineligible in accordance with HUD regulations set forth in 24 CFR 983.54

2.6 Protection of “In-Place” Families. Federal regulations protect families that are in place. The term “in-place family” means a family that is eligible for participation in the PBV Program residing in a proposed contract unit on the proposal selection date. Any proposal that includes an “in-place family” must ensure that those families qualify for the Program.

2.7 Solicitation Duration. Proposals will be accepted on a FIRST-COME, FIRST-SERVED rolling basis. Evaluations will occur every Monday with the first round of evaluations occurring on December 4, 2023. Notice of Owner Selections will be posted every Friday with the first round of selections occurring on December 8, 2023. Awards will be issued until the following award percentages are achieved:

| Group | Count | Percent |
|-------------------------|-------|---------|
| Transitional Aged Youth | 15 | 8% |
| Families | 53 | 27% |
| Elderly | 74 | 37% |
| Disabled | 58 | 29% |
| Total | 200 | 100 |

3.0 PROPOSAL INFORMATION

3.1 Application Requirements. The Authority will review, evaluate, rank and select applications according to the provisions within this solicitation. Prior to selecting units, the Authority will determine if each application is responsive to and in compliance with the Authority’s written selection criteria and procedures as stated in this document, in Chapter 17 Part II of the Authority’s Administrative Plan, and in conformity with HUD program regulations.

3.2 Application Submission Deadline. Owner applications and supporting documentation for PBV units must be submitted in an **electronic format (PDF)** via email to: procurement@SFHA.org. Submissions will be accepted and reviewed on a first

come- first served basis until **5:00 pm (PST) Friday, December 15, 2023, or until all available PBV assistance has been committed.**

3.3 Application Content. The applicant must complete the Authority’s PBV application provided in “**Attachment A**” that contains the following details:

- Owner Name and contact information, including email address
- Address of the proposed building
- Number and bedroom size of units proposed for PBV (Include the number of accessible units to be included in the proposal that comply with Section 504 of the Rehabilitation Act)
- Utility Responsibility and type (i.e., gas or electric) for cooking, heating, electricity, water, and trash; additionally, indicate if stove and refrigerator are provided.
- Project Location
- Requested Term of PBV HAP Contract
- Amenities at the property
- If units will be Project-Based with *in-place families who will receive an absolute preference (include the estimated annual income of existing residents and the number of persons in the household)

***The current income limits for in-place families are:**

| 50% Low-Income Limit FY 2023* | 1 Person | 2 Persons | 3 Persons | 4 Persons | 5 Persons | 6 Persons | 7 Persons |
|-------------------------------|----------|-----------|-----------|-----------|-----------|-----------|-----------|
| San Francisco | \$65,050 | \$74,350 | \$83,650 | \$92,900 | \$100,350 | \$107,800 | \$115,200 |

Note: Income limits are published by HUD and are subject to change

3.4 Proposal Organization. The Authority will only review COMPLETE proposals. All of the following information **must** be provided by the deadline for a proposal submission under this solicitation to be considered complete. Each proposal should be organized as outlined below. Page separators should clearly identify each section to facilitate quick reference and comparison to the material submitted by other proposers.

| TAB | REQUIRED PROPOSAL ITEMS | ITEM DESCRIPTION |
|----------|---|--|
| A | Authority PBV Application | See Attachment A |
| B | Tenant Selection Plan/Screening Criteria | Include in the proposal a proposed tenant selection plan and screening criteria for turnover units |

| | | |
|----------|---|---|
| C | Property Management Agreement, if applicable | If the project is managed by anyone other than the Owner, provide the agreement that governs the relationship and illustrates the responsibilities of the manager |
| D | Financial Statement | Provide the Pro forma income and expense statement for the property's most recent operating year |
| E | HUD Form 50071-Certification of Payments to Influence Federal Transactions | See Attachment B |
| F | HUD Form 2880-Applicant/Recipient Disclosure Update Report | See Attachment C |
| G | Rent Roll | |
| H | Proof of Ownership | Grant deed |

3.5 Responsiveness Review of Proposals. The Authority will review all proposal submissions for responsiveness on a rolling, first come-first served basis until the submission deadline or until enough responsive applications have been received for the total number of vouchers committed pursuant to this solicitation, whichever comes first. Proposals will be reviewed for:

- Evidence of site control/Ownership
- Certification that the Owner and other project principles are not on the U.S. General Services Administration list of parties excluded from Federal procurement and non-procurement programs.
- Confirmation that proposed initial gross rents are within 110% of the HUD published Fair Market Rent for the size of the unit.
- Assurance that property meets eligibility requirements under §983.52 (Eligible Housing Type), and §983.57 (Site selection standards).
- Confirmation that property is existing housing and meets inspection standards under HQS/NSPIRE.
- Assurance that not more than *25 units or twenty-five percent (25%) of units (whichever is greater) per building are eligible for PBV assistance, except units in a building that are specifically made available for qualifying households:

- That are elderly (age 62 or older)
- **Where the Owner will provide supportive services

**Note: Where the project is located in a census tract with a poverty rate of twenty (20%) percent or less, as determined in the most recent American Community Survey Five-Year estimates, the project cap is the greater of 25 units or 40% of the units in the project.*

***Note: In these cases, 100% of the units in such buildings are eligible for PBV assistance.*

If a proposal does not meet the requirements indicated above, it will be designated non-compliant. A notice mailed to the applicant will identify the disqualifying factor.

4.0 PROPOSAL EVALUATION FACTORS

4.1 Proposal Review Panel. The Authority will convene a selection panel of not fewer than three (3) panelists to compare, evaluate and rank each responsive proposal utilizing the selection criteria below. A ranking list will be prepared according to the points awarded to each proposal. The Authority may, in its discretion, select one or more of the proposals submitted, or none of the proposals submitted.

4.2 Ranking and Selection Criteria. The Authority will use the following to rank and select applications for the PBV Program. Each factor is comprised of several components with an associated point value. The total points awarded to an application will be an aggregate of the component subtotals. **The minimum score required to be considered for an award of Project Based Vouchers is 60 points.**

| CRITERIA | MAX. POINTS AVAILABLE |
|--|-----------------------|
| 1. Availability of Units to be Placed Under Contract | 30 |
| 2. Supportive Services Provided | 20 |
| 3. Proposal Compliments Other Local Activities | 10 |
| 4. Owner Experience | 20 |
| 5. PBV Contract Term Commitment | 10 |
| 6. Operating Deficit/Project Need | 10 |
| TOTAL | 100 |

4.3. Evaluation Panel Scoring. Each factor is comprised of several components with an associated point value.

| | |
|---|-----------------|
| 1. AVAILABILITY OF UNITS TO BE PLACED UNDER CONTRACT | MAX PTS. |
| The proposal indicates that project units will be available (meet HQS/NSPIRE standards and in-place income requirements) to be placed under contract and leased within 30 days of award | 30 |
| The proposal indicates that project units will be available (meet HQS/NSPIRE standards and in-place income requirements) to be placed under contract and leased within 60 days of award | 10 |
| Owner does not certify that project units will be available within 60 days of award | 0 |
| 2. SUPPORTIVE SERVICES PROVIDED | MAX PTS. |
| Extent to which services for special populations are provided on site or in the immediate area for occupants of the property. Services may include the following: Childcare/Early Childhood Education, Transportation or transportation assistance, Education/ESL Services, Job training, Vocational skills training and/or Employment Counseling, Technology Access/Skill Development, Substance/Alcohol Abuse Treatment or Counseling, Household Skill Trainings (housekeeping & homemaking), Homeownership Counseling, Family Budgeting, and/or Parenting Skills, etc. | |
| Three or more services provided or available | 20 |
| Two services provided or available | 10 |
| One service provided or available | 5 |
| No services provided by Owner or available in the community | 0 |
| 3. PROPOSAL COMPLIMENTS OTHER LOCAL ACTIVITIES | MAX PTS. |
| The proposed project complements other local activities such as the redevelopment of a public housing site under the HOPE VI program, the HOME program, CDBG activities, other development activities in a HUD-designated Enterprise Zone, Economic Community, or Renewal Community. | 10 |
| 4. OWNER EXPERIENCE | MAX PTS. |
| Demonstrated experience as an owner in the any Federal, State, or local subsidized rental housing program and owner compliance with the owner's obligations under any such program for 11 years or more. | 20 |
| Demonstrated experience as an owner in the Federal, State, or local subsidized rental housing program and owner compliance with the owner's obligations under any such program for 5 – 10 years. | 10 |
| Demonstrated experience as an owner in the Federal, State, or local subsidized rental housing program and owner compliance with the owner's obligations under the any such program for 1 – 4 years. | 5 |
| 5. PBV CONTRACT TERM COMMITMENT | MAX PTS. |
| Twenty-year commitment | 10 |
| 10 to 15-year contract term | 5 |
| 9 years or less contract term | 0 |
| 6. OPERATING DEFICIT/PROJECT NEED | MAX PTS. |

| | |
|---|----|
| Project financial statements/year-to-date budget shows an operating deficit that could be alleviated with the addition of project-based vouchers. | 10 |
|---|----|

4.4. Notice of Award. Notice of Owner Selections will be posted every Friday with the first round of selections occurring on December 8, 2023. Selections will be published weekly in the SF Chronicle and on the Authority website at www.sfha.org. The completed Notice will remain on the website for one month following the posting of the completed list.

5.0 Contract Requirements

5.1 Project based Voucher Housing Assistance Payment Contract. Under the PBV program, the Authority executes a Project-Based Voucher Housing Assistance Payment (PBV HAP) contract with the Owner for specified rental units, for a specified term (up to twenty years) subject to funding availability.

The Authority will enter into a Housing Assistance Payments (HAP) contract with the Owner for existing units selected that are approved for PBV assistance. The Authority will make housing assistance payments to the Owner in accordance with the PBV HAP contract for those contract units leased and occupied by eligible households during the HAP contract term.

At least seventy-five percent (75%) of the households approved for tenancy shall be households whose annual income does not exceed thirty percent (30%) of the median income for this area as determined by HUD and as adjusted by family size.

During the course of the tenant's lease, the Owner may not terminate the lease without good cause. "Good cause" does not include a business or economic reason or desire to use the unit for an individual, family, or non-residential rental purpose.

5.2 Occupancy and Vacant PBV Units. The Authority will utilize any of its available PBV waiting lists to fill all vacancies at the project throughout the duration of the term of the HAP Contract. Both the Owner and the tenant of a PBV assisted unit must notify the Authority if the tenant will be moving from the PBV unit. The Authority will notify appropriately sized households at the top of its wait list that a unit is available.

The Authority's subsidy standards determine the appropriate unit size for the family composition and all families selected for occupancy of a PBV unit must come from the Authority's waiting list unless they are eligible low-income "in-place" tenants.

5.3 PBV Eligible Families

All eligible families for the project will be referred and screened for program and income eligibility by the Authority in accordance with the Authority's Administrative Plan.

The Owner is responsible for screening and selection of the families referred by the Authority for suitability to occupy the Owner's unit based on their tenancy histories. The Authority has no responsibility or liability to the Owner or any other person for the family's behavior or suitability for tenancy.

5.4 Allowable Rent to Owner in PBV

The amount of the rent to the Owner is determined in accordance with HUD regulations. Except for certain tax credit units, the rent to the Owner must not exceed the lowest of:

- An amount determined by the Authority, not to exceed 110 percent of the applicable fair market rent (FMR) for the unit bedroom size minus any utility allowance;
- The reasonable rent; or
- The rent requested by the Owner.

Current Fair Market Rents as published by HUD effective 10/1/2023 are as follows:

| SFHA County | HUD 2023 Fair Market Rent by Bedroom Size (Effective 10/1/2023) | | | | |
|------------------------|--|----------|----------|----------|----------|
| | 0 | 1 | 2 | 3 | 4 |
| San Francisco | \$2,292 | \$2,818 | \$3,359 | \$4,112 | \$4,473 |

**Fair Market Rents are published by HUD and are subject to change.*

In no event will the rent exceed 110 percent of HUD's published Fair Market Rent less tenant-paid utility allowances, unless the project is located outside of a qualified census tract area and the project is receiving an award of Low-Income Housing Tax Credits. The utility allowance schedule can be found on the Authority's website at www.sfha.org "resources & forms" then find utility allowance.

An independent reasonable rent study will be prepared to ensure the rent is reasonable. The total rent to the Owner for PBV assisted units consists of the tenant rent (the portion of the rent to the Owner paid by the family) and the rental assistance paid by the Authority in accordance with the HAP. The Authority determines the tenant rent in accordance with HUD requirements.

The rules and requirements for the Project-Based Voucher Program are included in Authority's Housing Choice Voucher (HCV) Administrative Plan, Chapter 17-Project Based Vouchers. Interested parties may obtain a copy of the SFHA Administrative Plan on SFHA's website here: [SFHA Administrative Plan effective 10/1/2023](#)

6.0 Federal Program Regulations and the Authority Program Policies

The information contained in this application is a summary overview of the PBV Program. The Authority does not warrant that it is exhaustive and bears no responsibility for its accuracy or completeness. All persons submitting applications are encouraged to read the HUD regulations on the PBV Program for a full description of the Program's requirements (24 CFR Part 983). Activities under the PBV program are subject to HUD environmental regulations and may be subject to review under the National Environmental Policy Act by local authorities.

For a complete copy of the Authority's PBV program policies, please see Chapter 17 of the Authority's Administrative Plan (www.sfha.org "resources and forms" link).

The Authority does business in accordance with all equal opportunity and federal fair housing laws. The Authority does not discriminate against any person or business because of race, color, religion, sex, handicap, familial status, or national origin.

RFP # _____

**OWNER/DEVELOPER APPLICATION
for the
PROJECT BASED VOUCHER PROGRAM
at
CITY AND COUNTY OF SAN FRANCISCO HOUSING AUTHORITY**

INSTRUCTIONS:

Please fill out the attached form completely. If you fail to give complete information or documentation as required, your application will not be considered. All information on each application will be kept confidential. Please submit one application form for each property you wish to request Project Based Vouchers.

If you have any questions, or need assistance in completing the form, please contact the San Francisco Housing Authority.

A. IDENTITY OF APPLICANT/OWNER

1. Name and Address of Applicant:

Name

Street Address

City

State

Zip Code

Telephone _____

Email _____

2. Name and Address of owner of property, if different from above:

Note: Property must be located within the target area to be considered for this application.

Name

Street Address

City

State

Zip Code

Phone

Email

Name of Point of Contact

Point of Contact Email

B. DESCRIPTION OF PROPERTY

1. List the type of project:

_____Existing Housing _____New Construction _____Rehabilitation

2. Address of project:

_____Address 1

_____City, State

_____Zip Code

_____Total Number of Units at the Project

Is there an elevator? ____Yes ____No

3. What is the unit type for this property? (e.g., single family, garden style walk-up, high-rise, townhome, etc.)

Please provide a brief description of the project or attach supporting documentation:

4. Please indicate the number of units and bedroom size for which Project Based Vouchers are being sought.

| Size of Unit | Total Number Proposed | Number of Units Occupied | Number of Units Vacant |
|---------------|-----------------------|--------------------------|------------------------|
| Zero Bedroom | | | |
| One Bedroom | | | |
| Two Bedroom | | | |
| Three Bedroom | | | |
| Four Bedroom | | | |
| Five Bedroom | | | |

5. Of the proposed units to be assisted, please indicate which group the project will assist. You may check more than one:

Transitional Aged Youth _____
Families _____
Elderly _____
Disabled _____

6. **SUPPORTIVE SERVICES** - Will supportive services be offered at the site?

Yes _____ No _____

If yes, please describe the supportive services to be offered and the organization responsible for providing the services or attach supporting documentation. If service provider is different from owner, please provide copy of Memorandum of Understanding or other agreement outlining terms of services to be provided:

7. **COMPLIMENTS LOCAL ACTIVITIES** - Does this project compliment other local activities such as the redevelopment of a public housing site under the HOPE VI program, the HOME program, CDBG activities, other development activities in a HUD-designated Enterprise Zone, Economic Community, or Renewal Community?

Yes _____ No _____

If yes, please describe here or attach supporting documentation:

8. **AVAILABILITY OF UNITS** - Will the project units will be available (meet NSPIRE standards and in-place income requirements) to be placed under contract and leased within (please check one):

_____ 30 days of award

_____ 60 days of award

_____ More than 60 days of award

Please describe here or attach supporting documentation:

9. To the best of your knowledge, do the tenants currently occupying the property have incomes at or below the income limits published in the request for proposal?

Yes _____ No _____

Note: Please provide a rent roll that indicates household income and length of residency in the unit.

10. **OWNER EXPERIENCE** - The owner has demonstrated experience as an owner in the tenant-based voucher program and owner compliance with the owners obligation under the tenant-based program for:

_____ 11 years or more

_____ 5-10 years

_____ 1-4 years

Please describe here or attach supporting documentation:

11. Is the property experiencing an operating deficit as evidenced by the financial statement or year-to-date budget?

Yes _____ No _____

Note: Please provide financial statement and/or year-to-date budget.

12. PBV CONTRACT TERM REQUESTED – Please indicate the PBV Contract term commitment requested for the project:

_____ 20 years
_____ 10-15 years
_____ 1-9 years

Please describe here or attach supporting documentation:

13. Which utilities will be paid for by the tenant directly? (Check any which apply)

| | |
|-------------|-------|
| Electricity | _____ |
| Gas | _____ |
| Hot Water | _____ |
| Water | _____ |
| Garbage | _____ |
| Other | _____ |

14. Which utilities will be paid by the owner?

| | |
|-------------|-------|
| Electricity | _____ |
| Gas | _____ |
| Hot Water | _____ |
| Water | _____ |
| Garbage | _____ |
| Other | _____ |

15. For the utilities paid by the tenant, fill in “G” for Gas or “E” for Electric below:

Heating _____ Cooking _____ Hot Water Heating _____

16. What year was the property built?

17. List the distance (in blocks or miles) from this property to the nearest:

| | |
|-----------------------------|-------|
| _____ Supermarket | _____ |
| _____ Shopping District | _____ |
| _____ Public Transportation | _____ |
| _____ Hospital | _____ |

18. How many subsidized units will comply with Section 504 of the Rehabilitation Act of 1973 and have accessibility features (i.e., ADA compliant)?

_____ Number of Accessible Units

Please describe accessibility features at the project:

C. FINANCIAL INFORMATION (all applicants must complete)

1. What is the total amount of rent you have actually received on the units in the building over the last 12 months?

| <u>Size of Units</u> | <u>Number of Units</u> | <u>Total Rent Received</u> |
|--------------------------|----------------------------|--------------------------------|
| Studio | _____ | _____ |
| 1 Bedroom | _____ | _____ |
| 2 Bedroom | _____ | _____ |

| | | |
|-----------|-------|-------|
| 3 Bedroom | _____ | _____ |
| 4 Bedroom | _____ | _____ |
| 5 Bedroom | _____ | _____ |

If any unit was vacant for over two (2) months, indicate the size of the unit(s), the number of unit(s), and the total number of months the unit(s) were vacant.

2. Indicate the proposed monthly contract rent expected under the Project-Based Program.

| <u>Size of Units</u> | <u>Number of Units</u> | <u>Total Rent Requested</u> |
|--------------------------|----------------------------|---------------------------------|
| Studio | _____ | _____ |
| 1 Bedroom | _____ | _____ |
| 2 Bedroom | _____ | _____ |
| 3 Bedroom | _____ | _____ |
| 4 Bedroom | _____ | _____ |
| 5 Bedroom | _____ | _____ |

NOTE: In most cases, proposed contract rents must not exceed 110% of the established Fair Market Rents as published by HUD; If there is LIHTC and the project is located outside of a qualifying census tract, some exceptions may be made.

3. Purchase price of your property: \$_____
4. Amount originally financed on property at time of purchase:_____

5. Date of Purchase:

Month Year

6. Property Loan(s):

Amount of each loan on property: _____

Interest Rate of loan (%): _____

Term of Loan (Years): _____

Date Borrowed (Month/Year): _____

Current Outstanding Balance: _____

Current Monthly Principal & Interest Payment: _____

7. List any other liens on the property other than those above:

8. If you have made capital improvements on the property (as defined by the Internal Revenue Service), what was the nature, cost, and financing for these improvements?*

Kinds of improvements:_____

Cost of improvements:_____

Date improvements were made:_____

How were these improvements paid for? _____

** Generally, this includes anything which contributes to the value of the property, exclusive of routine maintenance.*

9. Estimate your annual insurance, real estate taxes, and other operating costs on the property.

Real Estate Taxes \$ _____ (Attach copies of last two(2) receipts)

Insurance \$ _____ (Attach proof of current annual premium)

Maintenance \$ _____

Management \$ _____

Utilities \$ _____

Note: Attach evidence of ownership or site control (e.g., grant deed, option, deposit receipt, lease).

D. PLANS FOR MANAGING AND MAINTAINING UNITS

A. Owner or Management Agent

NAME _____

NAME OF PROPOSED PROPERTY _____

OWNED _____ MANAGED _____

HOW LONG HAVE YOU MANAGED THE PROPERTY? _____

ADDRESS OF PROPERTY

B. Personnel for Property Management:

| | No. of Staff | Working Hours |
|---------------|--------------|---------------|
| OFFICE STAFF: | _____ | _____ |
| MAINTENANCE: | _____ | _____ |

C. Maintenance and Repair Plan

Method of handling following maintenance for the Property:

1. Routine Maintenance

2. Preventive Maintenance

3. Emergency Maintenance

Are any Maintenance Services contracted out? Yes _____ No _____

If so, please specify _____

Who should residents contact for service?

What is your garbage collection schedule? _____

Is this service contracted out? _____

How are your repainting, replacement of equipment and maintenance of grounds, if any, scheduled?

Are any of these contracted out? _____

How often? _____

If any items are routine, what schedule is followed?

Note: If you have a written agreement with a Property Manager or Managing Agent, please attach a copy of that agreement to this proposal.

E. CERTIFICATIONS

The Owner/Applicant Certifies that:

- a. The owner has not required any tenant to move without cause during the 12 months prior to the date of application.
- b. The owner will ensure that the work has been completed in accordance with the National Standards for the Physical Inspection of Real Estate (NSPIRE) and all applicable state and local requirements
- c. The owner will comply with labor standards and equal opportunity requirements in the development of housing (24 CFR 983.155(b)(1)(ii))
- d. The information and exhibits contained in this application and proposal are true, correct, and complete;

Owner Signature

Date: _____

All applications must include the following attachments, if applicable:

- A. SFHA PBV Application (Attachment A)
- B. Tenant Selection Plan
- C. Property Management Agreement, if applicable
- D. Financial statement (Proforma/Income and Expense Statement) for property's most recent operating year
- E. Certification of Payments to Influence Federal Transactions (HUD Form 50071), see attached
- F. Applicant/Recipient Disclosure Update Report (HUD Form 2880), see attached
- G. Rent Roll, if applicable for occupied units
 - a. Include household income and length of residency in unit
- H. Proof of Ownership (Grant Deed)

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 11/30/2023)

Public reporting burden for this information collection is estimated to average 30 minutes. This includes the time for collecting, reviewing, and reporting data. The information requested is required to obtain a benefit. This form is used to ensure federal funds are not used to influence members of Congress. There are no assurances of confidentiality. HUD may not conduct or sponsor, and an applicant is not required to respond to a collection of information unless it displays a currently valid OMB control number.

Applicant Name

Program/Activity Receiving Federal Grant Funding

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into, or any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all sub recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Title

Signature

Date (mm/dd/yyyy)

Applicant/Recipient Disclosure/Update Report

U.S. Department of Housing
and Urban Development

OMB Number: 2501-0017
Expiration Date: 1/31/2026

Public Reporting Burden Statement: This collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of the requested information. Comments regarding the accuracy of this burden estimate and any suggestions for reducing this burden can be sent to: U.S. Department of Housing and Urban Development, Office of the Chief Data Officer, R, 451 7th St SW, Room 8210, Washington, DC 20410-5000. Do not send completed HUD-2880 forms to this address. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid OMB control number. This agency is authorized to collect this information under Section 102 of the Department of Housing and Urban Development Reform Act of 1989. The information you provide will enable HUD to carry out its responsibilities under this Act and ensure greater accountability and integrity in the provision of certain types of assistance administered by HUD. This information is required to obtain the benefit sought in the grant program. Failure to provide any required information may delay the processing of your application and may result in sanctions and penalties including of the administrative and civil money penalties specified under 24 CFR §4.38. This information will not be held confidential and may be made available to the public in accordance with the Freedom of Information Act (5 U.S.C. §552). The information contained on the form is not retrieved by a personal identifier, therefore it does not meet the threshold for a Privacy Act Statement.

Applicant/Recipient Information

* UEI Number:

* Report Type:

INITIAL
UPDATE

1. Applicant/Recipient Name, Address, and Phone (include area code)

* Applicant Name:

* Street 1:

Street 2:

City:

State Abbreviation:

* Zip Code:

County:

* Country:

* Phone:

2. Employer ID Number (do not include individual social security numbers):

3. HUD Program Name:

4. Amount of HUD Assistance Requested/Received: \$

5. State the name and location (street address, City and State) of the project or activity

Project Name:

* Street 1:

Street 2:

City:

State Abbreviation:

* Zip Code:

County:

* Country: USA: UNITED STATES

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? These terms do not include formula grants, such as public housing operating subsidy or CDBG block grants. For further information see 24 CFR Sec. §4.3.

☐ Yes

☐ No

2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1-Sep. 30)? For further information, see 24 CFR §4.9.

☐ Yes

☐ No

If you answered "No" to either question 1 or 2, **Stop!** You do not need to complete the remainder of this form. However, you must sign the certification at the end of the report.

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds. Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

| | |
|---------------------------------------|---------------------------------------|
| Department/State/Local Agency Name | Department/State/Local Agency Name |
| * Government Agency Name: | * Government Agency Name: |
| Government Agency Address: | Government Agency Address: |
| * Street 1: | * Street 1: |
| Street 2: | Street 2: |
| City: State Abbreviation: * Zip Code: | City: State Abbreviation: * Zip Code: |
| County: | County: |
| Country: | Country: |
| * Type of Assistance: | * Type of Assistance: |
| * Amount Requested/Provided: \$ | * Amount Requested/Provided: \$ |
| * Expected Uses of the Funds: | * Expected Uses of the Funds: |

Note: For Part 1, use additional pages if necessary. Add Attachment:

Part III Interested Parties. You must disclose:

- All developers, contractors, or consultants involved in the application for assistance or in the planning, development, or implementation of the project or activity.

| * Alphabetical list of all persons with a reportable financial interest in the project or activity (for individuals, give the last name first) | * Unique Entity ID | * Type of Participation in Project/Activity | * Financial Interest in Project/Activity (\$ and %) | | | |
|--|--------------------|---|---|--|--|---|
| | | | \$ | | | % |
| | | | \$ | | | % |
| | | | \$ | | | % |

- Any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

| * Alphabetical list of all persons with a reportable financial interest in the project or activity (for individuals, give the last name first) | * City of Residence | * Type of Participation in Project/Activity | * Financial Interest in Project/Activity (\$ and %) | | | |
|--|---------------------|---|---|--|--|---|
| | | | \$ | | | % |
| | | | \$ | | | % |
| | | | \$ | | | % |

Note: For Part 2, use additional pages if necessary. Add Attachment:

Certification:

~~I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct and~~
Warning: Any person who knowingly or recklessly makes any false statement or omits any material information in any document or record submitted to or received from HUD or to any other Federal agency, or who knowingly or recklessly discloses such information to the public, is subject to criminal sanctions, including fines and imprisonment. Any person who knowingly or recklessly makes any false statement or omits any material information in any document or record submitted to or received from HUD or to any other Federal agency, or who knowingly or recklessly discloses such information to the public, is subject to civil money penalty not to exceed \$10,000 for each violation.

* Signature: * Date: (mm/dd/yyyy):

Instructions

Overview.

A. Coverage. You must complete this report if:

- (1) You are applying for assistance from HUD for a specific project or activity **and** you have received, or expect to receive, assistance from HUD in excess of \$200,000 during the fiscal year;
- (2) You are updating a prior report as discussed below; or
- (3) You are submitting an application for assistance to an entity other than HUD, a State or local government if the application is required by statute or regulation to be submitted to HUD for approval or for any other purpose.

B. Update reports (filed by "Recipients" of HUD Assistance):

General. All recipients of covered assistance must submit update reports to the Department to reflect substantial changes to the initial applicant disclosure reports.

Line-by-Line Instructions.

Applicant/Recipient Information.

All applicants for HUD competitive assistance, must complete the information required in blocks 1-5 of form HUD-2880:

1. Enter the full name, address, city, State, zip code, and telephone number (including area code) of the applicant/recipient. Where the applicant/recipient is an individual, the last name, first name, and middle initial must be entered.
2. Entry of the applicant/recipient's EIN, as appropriate, is optional. Individuals must not include social security numbers on this form.
3. Applicants enter the HUD program name under which the assistance is being requested.
4. Applicants enter the amount of HUD assistance that is being requested. Recipients enter the amount of HUD assistance that has been provided and to which the update report relates. The amounts are those stated in the application or award documentation. NOTE: In the case of assistance that is provided pursuant to contract over a period of time (such as project-based assistance under section 8 of the United States Housing Act of 1937), the amount of assistance to be reported includes all amounts that are to be provided over the term of the contract, irrespective of when they are to be received.
5. Applicants enter the name and full address of the project or activity for which the HUD assistance is sought. Recipients enter the name and full address of the HUD-assisted project or activity to which the update report relates. The most appropriate government identifying number must be used (e.g., RFP No.; IFB No.; grant announcement No.; or contract, grant, or loan No.) Include prefixes.

Part I. Threshold Determinations - Applicants Only

Part I contains information to help the applicant determine whether the remainder of the form must be completed. Recipients filing Update Reports should not complete this Part.

If the answer to **either** questions 1 or 2 is No, the applicant need not complete Parts II and III of the report, but must sign the certification at the end of the form.

Part II. Other Government Assistance and Expected Sources and Uses of Funds.

A. Other Government Assistance. This Part is to be completed by both applicants and recipients for assistance and recipients filing update reports. Applicants and recipients must report any other government assistance involved in the project or activity for which assistance is sought. Applicants and recipients must report any other government assistance involved in the project or activity. Other government assistance is defined in note 4 on the last page. For purposes of this definition, other government assistance is expected to be made available if, based on an assessment of all the circumstances involved, there are reasonable grounds to anticipate that the assistance will be forthcoming.

Both applicant and recipient disclosures must include all other government assistance involved with the HUD assistance, as well as

any other government assistance that was made available before the request, but that has continuing vitality at the time of the request. Examples of this latter category include tax credits that provide for a number of years of tax benefits, and grant assistance that continues to benefit the project at the time of the assistance request.

The following information must be provided:

1. Enter the name and address, city, State, and zip code of the government agency making the assistance available.
2. State the type of other government assistance (e.g., loan, grant, loan insurance).
3. Enter the dollar amount of the other government assistance that is, or is expected to be, made available with respect to the project or activities for which the HUD assistance is sought (applicants) or has been provided (recipients).
4. Uses of funds. Each reportable use of funds must clearly identify the purpose to which they are to be put. Reasonable aggregations may be used, such as "total structure" to include a number of structural costs, such as roof, elevators, exterior masonry, etc.

B. Non-Government Assistance. Note that the applicant and recipient disclosure report must specify all expected sources and uses of funds - both from HUD and any other source - that have been or are to be, made available for the project or activity. Non-government sources of Form HUD-2880 funds typically include (but are not limited to) foundations and private contributors.

Part III. Interested Parties.

This Part is to be completed by both applicants and recipients filing update reports. Applicants must provide information on:

1. All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
2. Any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower). Note: A financial interest means any financial involvement in the project or activity, including (but not limited to) situations in which an individual or entity has an equity interest in the project or activity, shares in any profit on resale or any distribution of surplus cash or other assets of the project or activity, or receives compensation for any goods or services provided in connection with the project or activity. Residency of an individual in housing for which assistance is being sought is not, by itself, considered a covered financial interest.

The information required below must be provided.

1. Enter the full names and addresses. If the person is an entity, the listing must include the full name and address of the entity as well as the CEO. Please list all names alphabetically.
2. Entry of the Unique Entity Identifier (UEI), for non-individuals, or city of residence, for individuals, for each organization and person listed is **optional**.
3. Enter the type of participation in the project or activity for each person listed: i.e., the person's specific role in the project (e.g., contractor, consultant, planner, investor).
4. Enter the financial interest in the project or activity for each person listed. The interest must be expressed both as a dollar amount and as a percentage of the amount of the HUD assistance involved.

Note that if any of the source/use information required by this report has been provided elsewhere in this application package, the applicant need not repeat the information, but need only refer to the form and location to incorporate it into this report. (It is likely that some of the information required by this report has been provided on SF 424A, or on various budget forms accompanying the application.) If this report requires information beyond that provided elsewhere in the application package, the applicant must include in this report all the additional information required. Recipients must submit an update report for any change in previously disclosed sources and uses of funds as provided in Section I.D.5., above.

Notes:

1. All citations are to 24 CFR Part 4, which was published in the Federal Register. [April 1, 1996, at 63 Fed. Reg. 14448.]
2. Assistance means any contract, grant, loan, cooperative agreement, or other form of assistance, including the insurance or guarantee of a loan or mortgage, that is provided with respect to a specific project or activity under a program administered by the Department. The term does not include contracts, such as procurements contracts, that are subject to the Fed. Acquisition Regulation (FAR) (48 CFR Chapter 1).
3. See 24 CFR §4.9 for detailed guidance on how the threshold is calculated.
4. "Other government assistance" is defined to include any loan, grant, guarantee, insurance, payment, rebate, subsidy, credit, tax benefit, or

any other form of direct or indirect assistance from the Federal government (other than that requested from HUD in the application), a State, or a unit of general local government, or any agency or instrumentality thereof, that is, or is expected to be made, available with respect to the project or activities for which the assistance is sought.

5. For the purpose of this form and 24 CFR Part 4, "person" means an individual (including a consultant, lobbyist, or lawyer); corporation; company; association; authority; firm; partnership; society; State, unit of general local government, or other government entity, or agency thereof (including a public housing agency); Indian tribe; and any other organization or group of people.

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

OMB Approval No. 2577-0157 (Exp. 03/31/2020)

Applicant Name

Program/Activity Receiving Federal Grant Funding

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all sub recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.
Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

| | |
|-----------------------------|-------------------|
| Name of Authorized Official | Title |
| Signature | Date (mm/dd/yyyy) |

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

| | | | | | |
|--|--|---|--|--|--|
| 1. Type of Federal Action: <input type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance | | 2. Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award | | 3. Report Type: <input type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____ | |
| 4. Name and Address of Reporting Entity: <input type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: 4c | | | 5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known: | | |
| 6. Federal Department/Agency: | | | 7. Federal Program Name/Description: CFDA Number, if applicable: _____ | | |
| 8. Federal Action Number, if known: | | | 9. Award Amount, if known: \$ _____ | | |
| 10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): | | | b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI): | | |
| 11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure. | | | Signature: _____ Print Name: _____ Title: _____ Telephone No.: _____ Date: _____ | | |
| Federal Use Only: | | | | Authorized for Local Reproduction Standard Form LLL (Rev. 7-97) | |

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
2. Identify the status of the covered Federal action.
3. Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizational level below agency name, if known. For example, Department of Transportation, United States Coast Guard.
7. Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
8. Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.

(b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0046), Washington, DC 20503.

Applicant/Recipient Disclosure/Update Report

U.S. Department of Housing
and Urban Development

OMB Number: 2501-0017
Expiration Date: 1/31/2026

Public Reporting Burden Statement: This collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of the requested information. Comments regarding the accuracy of this burden estimate and any suggestions for reducing this burden can be sent to: U.S. Department of Housing and Urban Development, Office of the Chief Data Officer, R, 451 7th St SW, Room 8210, Washington, DC 20410-5000. Do not send completed HUD-2880 forms to this address. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection displays a valid OMB control number. This agency is authorized to collect this information under Section 102 of the Department of Housing and Urban Development Reform Act of 1989. The information you provide will enable HUD to carry out its responsibilities under this Act and ensure greater accountability and integrity in the provision of certain types of assistance administered by HUD. This information is required to obtain the benefit sought in the grant program. Failure to provide any required information may delay the processing of your application and may result in sanctions and penalties including of the administrative and civil money penalties specified under 24 CFR §4.38. This information will not be held confidential and may be made available to the public in accordance with the Freedom of Information Act (5 U.S.C. §552). The information contained on the form is not retrieved by a personal identifier, therefore it does not meet the threshold for a Privacy Act Statement.

Applicant/Recipient Information

* UEI Number:

* Report Type: **INITIAL**

1. Applicant/Recipient Name, Address, and Phone (include area code)

* Applicant Name:

* Street 1:

Street 2:

City:

State Abbreviation:

* Zip Code:

County:

* Country:

* Phone:

2. Employer ID Number (do not include individual social security numbers):

3. HUD Program Name:

4. Amount of HUD Assistance Requested/Received: \$

5. State the name and location (street address, City and State) of the project or activity

Project Name:

* Street 1:

Street 2:

City:

State Abbreviation:

* Zip Code:

County:

* Country: USA: UNITED STATES

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? These terms do not include formula grants, such as public housing operating subsidy or CDBG block grants. For further information see 24 CFR Sec. §4.3.

☐ Yes

☐ No

2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1-Sep. 30)? For further information, see 24 CFR §4.9.

☐ Yes

☐ No

If you answered "No" to either question 1 or 2, **Stop!** You do not need to complete the remainder of this form. However, you must sign the certification at the end of the report.

Part II Other Government Assistance Provided or Requested/Expected Sources and Use of Funds. Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

| | |
|---------------------------------------|---------------------------------------|
| Department/State/Local Agency Name | Department/State/Local Agency Name |
| * Government Agency Name: | * Government Agency Name: |
| Government Agency Address: | Government Agency Address: |
| * Street 1: | * Street 1: |
| Street 2: | Street 2: |
| City: State Abbreviation: * Zip Code: | City: State Abbreviation: * Zip Code: |
| County: | County: |
| Country: | Country: |
| * Type of Assistance: | * Type of Assistance: |
| * Amount Requested/Provided: \$ | * Amount Requested/Provided: \$ |
| * Expected Uses of the Funds: | * Expected Uses of the Funds: |

Note: For Part 1, use additional pages if necessary. Add Attachment:

Part III Interested Parties. You must disclose:

1. All developers, contractors, or consultants involved in the application for assistance or in the planning, development, or implementation of the project or activity.

| * Alphabetical list of all persons with a reportable financial interest in the project or activity (for individuals, give the last name first) | * Unique Entity ID | * Type of Participation in Project/Activity | * Financial Interest in Project/Activity (\$ and %) | | | |
|--|--------------------|---|---|--|--|---|
| | | | \$ | | | % |
| | | | \$ | | | % |
| | | | \$ | | | % |

2. Any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

| * Alphabetical list of all persons with a reportable financial interest in the project or activity (for individuals, give the last name first) | * City of Residence | * Type of Participation in Project/Activity | * Financial Interest in Project/Activity (\$ and %) | | | |
|--|---------------------|---|---|--|--|---|
| | | | \$ | | | % |
| | | | \$ | | | % |
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Note: For Part 2, use additional pages if necessary. Add Attachment:

Certification:

~~I/We, the undersigned, certify under penalty of perjury that the information provided above is true and correct.~~
Warning: If you knowingly make a false statement on this form, you may be subject to criminal and/or civil penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including financial or non-financial, is subject to civil money penalty not to exceed \$10,000 for each violation.

* Signature:

* Date: (mm/dd/yyyy):

Instructions

Overview.

A. Coverage. You must complete this report if:

- (1) You are applying for assistance from HUD for a specific project or activity **and** you have received, or expect to receive, assistance from HUD in excess of \$200,000 during the fiscal year;
- (2) You are updating a prior report as discussed below; or
- (3) You are submitting an application for assistance to an entity other than HUD, a State or local government if the application is required by statute or regulation to be submitted to HUD for approval or for any other purpose.

B. Update reports (filed by "Recipients" of HUD Assistance):

General. All recipients of covered assistance must submit update reports to the Department to reflect substantial changes to the initial applicant disclosure reports.

Line-by-Line Instructions.

Applicant/Recipient Information.

All applicants for HUD competitive assistance, must complete the information required in blocks 1-5 of form HUD-2880:

1. Enter the full name, address, city, State, zip code, and telephone number (including area code) of the applicant/recipient. Where the applicant/recipient is an individual, the last name, first name, and middle initial must be entered.
2. Entry of the applicant/recipient's EIN, as appropriate, is optional. Individuals must not include social security numbers on this form.
3. Applicants enter the HUD program name under which the assistance is being requested.
4. Applicants enter the amount of HUD assistance that is being requested. Recipients enter the amount of HUD assistance that has been provided and to which the update report relates. The amounts are those stated in the application or award documentation. NOTE: In the case of assistance that is provided pursuant to contract over a period of time (such as project-based assistance under section 8 of the United States Housing Act of 1937), the amount of assistance to be reported includes all amounts that are to be provided over the term of the contract, irrespective of when they are to be received.
5. Applicants enter the name and full address of the project or activity for which the HUD assistance is sought. Recipients enter the name and full address of the HUD-assisted project or activity to which the update report relates. The most appropriate government identifying number must be used (e.g., RFP No.; IFB No.; grant announcement No.; or contract, grant, or loan No.) Include prefixes.

Part I. Threshold Determinations - Applicants Only

Part I contains information to help the applicant determine whether the remainder of the form must be completed. Recipients filing Update Reports should not complete this Part.

If the answer to **either** questions 1 or 2 is No, the applicant need not complete Parts II and III of the report, but must sign the certification at the end of the form.

Part II. Other Government Assistance and Expected Sources and Uses of Funds.

A. Other Government Assistance. This Part is to be completed by both applicants and recipients for assistance and recipients filing update reports. Applicants and recipients must report any other government assistance involved in the project or activity for which assistance is sought. Applicants and recipients must report any other government assistance involved in the project or activity. Other government assistance is defined in note 4 on the last page. For purposes of this definition, other government assistance is expected to be made available if, based on an assessment of all the circumstances involved, there are reasonable grounds to anticipate that the assistance will be forthcoming.

Both applicant and recipient disclosures must include all other government assistance involved with the HUD assistance, as well as

any other government assistance that was made available before the request, but that has continuing vitality at the time of the request. Examples of this latter category include tax credits that provide for a number of years of tax benefits, and grant assistance that continues to benefit the project at the time of the assistance request.

The following information must be provided:

1. Enter the name and address, city, State, and zip code of the government agency making the assistance available.
2. State the type of other government assistance (e.g., loan, grant, loan insurance).
3. Enter the dollar amount of the other government assistance that is, or is expected to be, made available with respect to the project or activities for which the HUD assistance is sought (applicants) or has been provided (recipients).
4. Uses of funds. Each reportable use of funds must clearly identify the purpose to which they are to be put. Reasonable aggregations may be used, such as "total structure" to include a number of structural costs, such as roof, elevators, exterior masonry, etc.

B. Non-Government Assistance. Note that the applicant and recipient disclosure report must specify all expected sources and uses of funds - both from HUD and any other source - that have been or are to be, made available for the project or activity. Non-government sources of Form HUD-2880 funds typically include (but are not limited to) foundations and private contributors.

Part III. Interested Parties.

This Part is to be completed by both applicants and recipients filing update reports. Applicants must provide information on:

1. All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
2. Any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower). Note: A financial interest means any financial involvement in the project or activity, including (but not limited to) situations in which an individual or entity has an equity interest in the project or activity, shares in any profit on resale or any distribution of surplus cash or other assets of the project or activity, or receives compensation for any goods or services provided in connection with the project or activity. Residency of an individual in housing for which assistance is being sought is not, by itself, considered a covered financial interest.

The information required below must be provided.

1. Enter the full names and addresses. If the person is an entity, the listing must include the full name and address of the entity as well as the CEO. Please list all names alphabetically.
2. Entry of the Unique Entity Identifier (UEI), for non-individuals, or city of residence, for individuals, for each organization and person listed is **optional**.
3. Enter the type of participation in the project or activity for each person listed: i.e., the person's specific role in the project (e.g., contractor, consultant, planner, investor).
4. Enter the financial interest in the project or activity for each person listed. The interest must be expressed both as a dollar amount and as a percentage of the amount of the HUD assistance involved.

Note that if any of the source/use information required by this report has been provided elsewhere in this application package, the applicant need not repeat the information, but need only refer to the form and location to incorporate it into this report. (It is likely that some of the information required by this report has been provided on SF 424A, or on various budget forms accompanying the application.) If this report requires information beyond that provided elsewhere in the application package, the applicant must include in this report all the additional information required. Recipients must submit an update report for any change in previously disclosed sources and uses of funds as provided in Section I.D.5., above.

Notes:

1. All citations are to 24 CFR Part 4, which was published in the Federal Register. [April 1, 1996, at 63 Fed. Reg. 14448.]
2. Assistance means any contract, grant, loan, cooperative agreement, or other form of assistance, including the insurance or guarantee of a loan or mortgage, that is provided with respect to a specific project or activity under a program administered by the Department. The term does not include contracts, such as procurements contracts, that are subject to the Fed. Acquisition Regulation (FAR) (48 CFR Chapter 1).
3. See 24 CFR §4.9 for detailed guidance on how the threshold is calculated.
4. "Other government assistance" is defined to include any loan, grant, guarantee, insurance, payment, rebate, subsidy, credit, tax benefit, or

any other form of direct or indirect assistance from the Federal government (other than that requested from HUD in the application), a State, or a unit of general local government, or any agency or instrumentality thereof, that is, or is expected to be made, available with respect to the project or activities for which the assistance is sought.

5. For the purpose of this form and 24 CFR Part 4, "person" means an individual (including a consultant, lobbyist, or lawyer); corporation; company; association; authority; firm; partnership; society; State, unit of general local government, or other government entity, or agency thereof (including a public housing agency); Indian tribe; and any other organization or group of people.